

Massachusetts DEP 2003 Annual Compost Site Report

Part A: General Information

- Please provide any necessary corrections or additions to the site and owner information provided below.

1. Site Information

<i>Site Name:</i>	<i>Street Address:</i>
<i>City, State, ZIP:</i>	
<i>Phone Number:</i>	<i>Contact Name, Title:</i>

<i>Owner Name:</i>	<i>Street Address:</i>
<i>City, State, ZIP:</i>	
<i>Phone Number:</i>	<i>Contact Name, Title:</i>
<i>E-Mail:</i>	<i>Website:</i>

- Please provide information on the person who completed or authorized completion of this form.

3. Certification

<i>I certify that the information provided in this report is accurate to the best of my knowledge.</i>	
<i>Signature:</i>	<i>Date:</i>
<i>Print Name:</i>	<i>Phone Number:</i>
<i>Title:</i>	<i>Organization Name:</i>


- Please indicate which of the following types of technical assistance you would be interested in receiving.



4. Technical Assistance

<input type="checkbox"/> Site visit by DEP staff	<input type="checkbox"/> Leaf & Yard Waste Composting Guidance Document
<input type="checkbox"/> Workshop on compost site operations <input type="checkbox"/> Guidelines for Centralized Grass Composting	
<input type="checkbox"/> Use of a shredder for brush and limbs up to 12" diameter	
<input type="checkbox"/> Other (<i>specify</i>):	

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Part B: 2003 Operations

 Please record the tons of organic material accepted in 2003, converting volume to weight when necessary. For help in estimating quantities, see "Calculating Organic Material Accepted" in the Report Form Directions.

-  Enter the tons of organic material accepted by each type of organic material for both in-state and out-of-state sources.
-  Add the waste type totals under the totals column and place sum in grand total box.

1. Organic Material Accepted

Do you collect materials for composting, but send to another facility to be composted? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If so, where do you send it? _____				
Do you allow commercial entities to use the municipal site? <input type="checkbox"/> Yes <input type="checkbox"/> No				
PLEASE REPORT TONNAGE BELOW EVEN IF YOU SEND MATERIALS TO ANOTHER FACILITY TO BE COMPOSTED.				
	ORIGIN OF ORGANIC MATERIAL		TOTALS	2002 GRAND TOTAL FOR REFERENCE
Type	<i>In-State</i>	<i>Out-Of-State</i>		
LEAVES (5 CY/TON)				THIS SPACE INTENTIONALLY BLANK
GRASS (3 CY/TON)				
BRUSH (4 CY/TON)				
FOOD WASTE (1.33 CY/TON)				
OTHER _____				
Grand Total				

 Please list the municipalities that the composting site served. Attach additional sheets if necessary.

2. Municipalities Served

Municipality Name	State	Tons

4. Brush Processing

Do you accept brush for processing? ☐ Yes ☐ No Do you accept Christmas trees? ☐ Yes ☐ No

5. Products

Product Name	Total Cubic Yards Produced	Screened (Yes/No)	Blended with Soil (Yes/No)
Finished Compost	cy		
Other (specify) _____	cy		
Other (specify) _____	cy		
Are you interested in marketing your compost? <input type="checkbox"/> Yes <input type="checkbox"/> No			

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